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<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/035,749	
	Filing Date	October 23, 2001	
	First Named Inventor	Watson, Thomas J.	
	Group Art Unit	2878	
	Examiner Name		
Total Number of Pages in this Submission	3	Attorney Docket Number	711901.1050

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment / Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Documents  <input type="checkbox"/> Response to Missing Parts/Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application)  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group <small>(Appeal Notice, Answer, Reply Brief)</small>  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="margin-left: 20px;"> <i>Copies of Statement Under 37 CFR 3.73(b), and Assignment</i> </div>
REMARKS		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	
Individual Name	David L. Berdan, Registration No. 41,614
Signature	<i>[Signature]</i>
Date	9/14/02

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:		9-16-2002
Typed or printed name	Cynthia K. Dempster	
Signature	<i>[Signature]</i>	Date 9-16-2002

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**FACSIMILE TRANSMISSION**

April 2, 2003

**TO**

Sheila

Art Group Unit #2800

**FAX: 703-306-5515**

**From**

Cynthia K. Dempster

**FAX: 256-704-3905**

**RE: Application No. 10/035,749**

(Message)

Sheila,

Per our telephone conversation this date, I have attached the Transmittal Form and Power of Attorney, Revocation of Prior Powers and Change of Correspondence Address for the above-referenced patent application.

As I stated we submitted these papers on 9/16/2002 and have not received any confirmation that the changes have taken place.

Any help that you can provide in this matter will be greatly appreciated.

**Number of Pages (Including This Cover Sheet): - [6] - Page(s)**  
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